



American Association of Oral and Maxillofacial Surgeons



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Federal Affairs

[Call for Action: National Institute on Drug Abuse SHORT SURVEY](#)

The National Institute on Drug Abuse (NIDA), part of the National Institutes of Health, is supporting the development of continuing education efforts to help address the growing problem of adolescent substance use.

NIDA asks that prescribing professionals take this 7 minute survey to help identify the information that would be most useful to you and your colleagues regarding early intervention for substance use with adolescent patients and their parents. Your participation in the survey is completely voluntary.

Responses to this NIDA survey and its results are completely anonymous. Thank you in advance for taking the time to complete this brief survey.

For direct access to the survey please visit [OMS Survey NIDA](#). This link will be active through Wednesday, March 31, 2015.

AAOMS Celebrates 15th Anniversary of Day on the Hill; Legislative Priorities Still Ripe for Grassroots Action!

On March 17-18, 110 oral and maxillofacial surgeons (OMSs) from around the country gathered in Washington, DC for AAOMS's 15th Annual Day on the Hill. On April 18, these OMSs met with more than 160 members of Congress or their staff to discuss legislative issues important to the specialty. For more information about the event, including photos which will be posted soon, please visit the [Day on the Hill webpage](#).

In the days leading up to the meeting, AAOMS sent out a grassroots campaign alert urging members who were unable to join their colleagues at Day on the Hill to contact their constituent members of Congress and ask them to support AAOMS's Day on the Hill priority legislative issues. As a result, more than 850 messages were sent to Congress from AAOMS members in support of the association's advocacy efforts! While 850 messages is a great start, there is still room for improvement as the issues discussed at Day on the Hill in Congressional offices are still ripe for action. With just a few keystrokes, you can [contact your members of Congress](#) about three important issues: 1) repealing the medical device excise tax from the health reform law; 2) expanding the availability and use of Flexible Spending Accounts (FSAs) and Health Savings Accounts (HSAs); and 3) reforming student loan repayment. Additionally, there are numerous other ways that you can get involved in AAOMS's advocacy efforts. We encourage you to learn more about and join the [OMS Action Network](#), which provides AAOMS members with a clear starting point to participate in the association's grassroots initiatives.

US Supreme Court Hears Arguments in Case that Could Affect the Affordable Care Act

On March 4, the US Supreme Court finished hearing oral arguments in *King v. Burwell*, the case brought by challengers to the health care law's system of distributing insurance subsidies. The court appeared divided as the justices heard almost 90 minutes of arguments in the case, which will be decided by the end of June. A ruling against the federal government could upend the nation's health insurance system and make coverage unaffordable for millions of Americans in the 34 states without a state-run health insurance exchange.

Deal to Reform Medicare Physician Reimbursement and Eliminate SGR Introduced

On March 24, leaders in the Senate and House introduced bipartisan, bicameral legislation ([HR 2](#)) to replace the broken Medicare Sustainable Growth Rate (SGR) formula with an improved payment system that rewards quality, efficiency and innovation. Specifically, the legislation would:

- Repeal the SGR and end the annual threat to seniors' care, while instituting a 0.5% payment update each year for five years.
- Improve the fee-for-service system by streamlining Medicare's existing web of quality programs into a single value-based performance program. It would increase payment accuracy and encourage physicians to adopt proven practices.
- Incentivize the use of alternative payment models to encourage doctors and providers to focus on coordination and prevention to improve quality and reduce costs.
- Make Medicare more transparent by giving patients better access to information and supplying doctors with data they can use to improve care.

In previous years, this type of legislation has stalled due to the fact that lawmakers could not agree on how to pay for it. This time, however, members of the House committees in charge of healthcare issues have offered a partial cost offset of about \$70 billion in spending cuts. If approved, the legislation would split the spending reductions almost evenly between cuts to providers (mainly placed on hospitals, post-acute care providers, and delinquent Medicare providers) and changes to benefits, which may include increased cost-sharing for wealthier Medicare beneficiaries.

The House is expected to vote on the legislation March 26 before a two-week recess. We do not know if or when the Senate will take up the legislation.

FDA Releases Mobile App for Monitoring/Reporting Drug Shortages

The US Food and Drug Administration (FDA) has released its first mobile app, which allows users to report a drug shortage or supply issue and identify current and resolved drug shortages and drug discontinuances. "The FDA understands that health care professionals and pharmacists need real-time information about drug shortages to make treatment decisions," noted Valerie Jensen, associate director of the Drug Shortage Staff in the FDA's Center for Drug Evaluation and Research, in a March 4, 2015 FDA press release. "The new mobile app is an innovative tool that will offer easier and faster access to important drug shortage information." More information, including details on how to download the app, is available on the [FDA website](#).

State Affairs

US Supreme Court Rules in Favor of FTC; Changes Ahead for State Regulatory Boards

On February 25, 2015, the US Supreme Court, in a 6-3 decision, made it clear that state occupational boards controlled by members of the same occupation are subject to federal antitrust laws unless the state actively supervises the board's decisions. The decision came in response to *North Carolina State Board of Dental Examiners v. Federal Trade Commission*, a case that involved a claim of antitrust immunity by the Board following the issuance of cease and desist letters to tooth whitening establishments for engaging in the unlicensed practice of dentistry. In response to the ruling, we can expect state regulatory boards, including state dental boards, to reexamine their structure and oversight protocols. Some regulatory boards already have such protocols in place and will not need to take any action. OMSs should remain engaged with their state dental boards as any changes could affect their practices and patients.

Health Information Technology

FDA Urges Medical Device Oversight

A [report](#) commissioned by the FDA and developed by the Brookings Institution is calling for the creation of a \$250 million national surveillance system for medical devices. The system would be enacted in two stages over the course of seven years. Within the first two years, the FDA proposes to initiate an incubator project to develop a five-year implementation plan, which would encompass the second stage of implementation. The report stems from several infection control cases where medical devices were found to transmit superbugs amongst patients in hospital settings.

Practice Management

Claims Documentation Improvement

AAOMS members are increasingly contacting the headquarters office with reports of increased insurer scrutiny of surgical extraction claims and demands for improved accompanying documentation. In addition, health plans are conducting more frequent utilization reviews/audits of doctors and have even requested refunds of previous payments when their audits deem the claim documentation insufficient.

Complete and comprehensive documentation is important for both reimbursement and patient care. The increased specificity of the ICD-10 code set makes proper claim documentation more important than ever. Claims are often rejected or down-coded due to lack of documentation to support the codes reported. Complete and accurate medical records ensure proper patient treatment. Please remember, if it isn't in the patient's record, it didn't happen.

For information and tips on improving your documentation, register for the following AAOMS Webinar: [“Unlocking Claim Confusion: The Key is Proper Documentation to Get that Claim Processed – What Works and What Doesn't,”](#) which will be held on April 29.

HIPAA Risk Assessment Required by HIPAA Security Rule – Test Your Office Today!

The HIPAA Security Rule makes it mandatory for EVERY medical or dental practice to take an annual Risk Assessment. As an ASI Approved Program, **PCIHIPAA** is providing a FREE Risk Assessment to all AAOMS Members. Upon completion of the assessment, you will receive a HIPAA Risk Score and a full report itemizing your vulnerabilities. If you don't understand your vulnerabilities, how can you correct them? Taking a Risk Assessment is the right first step towards HIPAA compliance. [Click here to take the 2015 Risk Assessment through PCIHIPAA.](#)